



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/008,792
Filed: November 13, 2001
Inventor(s):
Geoffrey Schmit, Brent Schwan,
Jonathan Brumley, Thomas A.
Makowski and Christopher T.
Bartz

**Title: MEASUREMENT
SYSTEM SOFTWARE
ARCHITECTURE
FOR EASILY CREATING
HIGH-PERFORMANCE
MEASUREMENT
APPLICATIONS**

Examiner: Wachsman, Hal D.
Group/Art Unit: 2857
Atty. Dkt. No: 5150-52901

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, Alexandria, VA 22313-1450, on the date indicated below.

Jeffrey C. Hood

Signature

August 10, 2004
Date

**AMENDMENT; RESPONSE TO OFFICE ACTION OF
MAY 10, 2004**

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Please amend the case as listed below.

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims that begins on page 3 of this paper.

Remarks begin on page 21 of this paper.

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10/00 8792

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 = *	Y
INDEPENDENT CLAIMS	minus 3 = *	-
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

		(Column 1)		(Column 2)		(Column 3)
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
	Total	* 107	Minus	** 77	=	30
	Independent	* 7	Minus	*** 5	=	2
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

		(Column 1)		(Column 2)		(Column 3)
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
	Total	*	Minus	**	=	
	Independent	*	Minus	***	=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

		(Column 1)		(Column 2)		(Column 3)
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
	Total	*	Minus	**	=	
	Independent	*	Minus	***	=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY
TYPE ☐

OR OTHER THAN
SMALL ENTITY

RATE	FEE
BASIC FEE	370.00
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	FEE
BASIC FEE	740.00
X\$18=	
X84=	
+280=	
TOTAL	

SMALL ENTITY

OR OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	540
X84=	172
+280=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	